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8	BEFORE THE				
9	BOARD OF REGISTERED NURSING DEPARTMENT OF CONSUMER AFFAIRS				
10	STATE OF CALIFORNIA				
11	In the Matter of the Accusation Against: Case No. 2010 - 594				
12	LINDA LEE LEWIS A C C U S A T I O N				
13	1813 Trares Road Mogadore, OH 44260				
14	Registered Nurse License No. 547096				
15	Respondent.				
16					
17	Complainant alleges:				
18	PARTIES				
19	1. Louise R. Bailey, M.Ed., RN (Complainant) brings this Accusation solely in her				
20	official capacity as the Interim Executive Officer of the Board of Registered Nursing, Departmen				
21	of Consumer Affairs.				
22	2. On or about August 21, 1998, the Board of Registered Nursing issued Registered				
23	Nurse License Number 547096 to Linda Lee Lewis (Respondent). The Registered Nurse License				
24	expired on October 31, 2009, and has not been renewed.				
25	JURISDICTION				
26	3. Business and Professions Code ("Code") section 2750 provides, in pertinent part, tha				
27	the Board may discipline any licensee for any reason provided in Article 3 (commencing with				
28	section 2750) of the Nursing Practice Act.				

4. Code section 2764 provides, in pertinent part, that the expiration of a license shall not deprive the Board of jurisdiction to proceed with a disciplinary proceeding against the licensee or to render a decision imposing discipline on the license. Under Code section 2811, subdivision (b), the Board may renew an expired license at any time within eight years after the expiration.

5. Code section 2761 states, in pertinent part:

The board may take disciplinary action against a certified or licensed nurse or deny an application for a certificate or license for any of the following:

(a) Unprofessional conduct, which includes, but is not limited to, the following:

(1) Incompetence, or gross negligence in carrying out usual certified or licensed nursing functions.

#### STATUTORY PROVISIONS

6. Code section 2762 states, in pertinent part:

In addition to other acts constituting unprofessional conduct within the meaning of this chapter [the Nursing Practice Act], it is unprofessional conduct for a person licensed under this chapter to do any of the following:

- (a) Obtain or possess in violation of law, or prescribe, or except as directed by a licensed physician and surgeon, dentist, or podiatrist administer to himself or herself, or furnish or administer to another, any controlled substance as defined in Division 10 (commencing with Section 11000) of the Health and Safety Code or any dangerous drug or dangerous device as defined in Section 4022.
- , (b) Use any controlled substance as defined in Division 10 (commencing with Section 11000) of the Health and Safety Code, or any dangerous drug or dangerous device as defined in Section 4022, or alcoholic beverages, to an extent or in a manner dangerous or injurious to himself or herself, any other person, or the public or to the extent that such use impairs his or her ability to conduct with safety to the public the practice authorized by his or her license . . .

#### 7. Code section 2770.11 states:

(a) Each registered nurse who requests participation in a diversion program shall agree to cooperate with the rehabilitation program designed by the committee and approved by the program manager. Any failure to comply with the provisions of a rehabilitation program may result in termination of the registered nurse's participation in a program. The name and license number of a registered nurse who is terminated for any reason, other than successful completion, shall be reported to the board's enforcement program.

(b) If the program manager determines that a registered nurse, who is denied admission into the program or terminated from the program, presents a threat to the public or his or her own health and safety, the program manager shall report the name and license number, along with a copy of all diversion records for that registered nurse, to the board's enforcement program. The board may use any of the records it receives under this subdivision in any disciplinary proceeding.

#### 8. Code section 4060 states:

No person shall possess any controlled substance, except that furnished to a person upon the prescription of a physician, dentist, podiatrist, optometrist, veterinarian, or naturopathic doctor pursuant to Section 3640.7, or furnished pursuant to a drug order issued by a certified nurse-midwife pursuant to Section 2746.51, a nurse practitioner pursuant to Section 2836.1, a physician assistant pursuant to Section 3502.1, a naturopathic doctor pursuant to Section 3640.5, or a pharmacist pursuant to either subparagraph (D) of paragraph (4) of, or clause (iv) of subparagraph (A) of paragraph (5) of, subdivision (a) of Section 4052. This section shall not apply to the possession of any controlled substance by a manufacturer, wholesaler, pharmacy, pharmacist, physician, podiatrist, dentist, optometrist, veterinarian, naturopathic doctor, certified nurse-midwife, nurse practitioner, or physician assistant, when in stock in containers correctly labeled with the name and address of the supplier or producer. Nothing in this section authorizes a certified nurse-midwife, a nurse practitioner, a physician assistant, or a naturopathic doctor, to order his or her own stock of dangerous drugs and devices.

### 9. Code section 4324, subdivision (a), states:

Every person who signs the name of another, or of a fictitious person, or falsely makes, alters, forges, utters, publishes, passes, or attempts to pass, as genuine, any prescription for any drugs is guilty of forgery and upon conviction thereof shall be punished by imprisonment in the state prison, or by imprisonment in the county jail for not more than one year.

- 10. Health and Safety Code section 11170 states that no person shall prescribe, administer, or furnish a controlled substance for himself.
  - 11. Health and Safety Code section 11173 states, in pertinent part:
  - (a) No person shall obtain or attempt to obtain controlled substances, or procure or attempt to procure the administration of or prescription for controlled substances, (1) by fraud, deceit, misrepresentation, or subterfuge . . .

#### COST RECOVERY

12. Code section 125.3 provides, in pertinent part, that the Board may request the administrative law judge to direct a licentiate found to have committed a violation or violations of the licensing act to pay a sum not to exceed the reasonable costs of the investigation and enforcement of the case.

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### CONTROLLED SUBSTANCES AT ISSUE

- 13. Ativan, trade name for Lorazepam, is a Schedule IV controlled substance pursuant to Health and Safety Code section 11057(d)(16) and a dangerous drug pursuant to Code section 4022. Lorazepam is a benzodiazephone with antianxiety, sedative, and anticonvulsant effects.
- 14. Dilaudid, trade name for Hydromorphone, is a Schedule II controlled substance pursuant to Health and Safety Code section 11055(b)(1)(K) and a dangerous drug pursuant to Code section 4022. Dilaudid is a narcotic analgesic prescribed for the relief of moderate to severe pain.
- 15. Vicodin, trade name for the narcotic substance Hydrocodone with the non-narcotic substance Acetaminophen, is a Schedule III controlled substance pursuant to Health and Safety Code section 11055(b)(1)(J) and a dangerous drug pursuant to Code section 4022. Vicodin is used to relieve moderate to severe pain.

### FIRST CAUSE FOR DISCIPLINE

(Diversion, Possession, Prescription, and Self-Administration of Controlled Substances)

16. Respondent is subject to disciplinary action pursuant to Code section 2761, subdivision (a), on the grounds of unprofessional conduct, as defined by Code section 2762, subdivision (a), in that between May 3 and May 27, 2007, while employed as a registered nurse at the West Anaheim Medical Center, located in Anaheim, California, Respondent did the following:

#### **Diversion of Controlled Substances:**

- a. Respondent obtained the controlled substances, Atavan, Dilaudid, and Vicodin, by fraud, deceit, misrepresentation, or subterfuge, in violation of Health and Safety Code section 11173, subdivision (a), as follows:
- i. Patient TT: On May 3, 2007, without any physician order for the medication, Respondent used the Acudose-RX cabinet<sup>1</sup> to withdraw 1mg of dilaudid. Respondent did not

AcuDose-RX is a decentralized medication dispensing cabinet that automates the storing, dispensing, and tracking of medications in resident care areas. The system dispenses pharmaceutical medications to an individual authorized to access the system by user-id and (continued...)

record the administration of this medication to the patient. Accordingly, 1mg of dilaudid in Respondent's possession went missing. There is no documentation that it was wasted.

ii. Patient ET: On May 9, 2007, without any physician order for the medication, Respondent used the Acudose-RX cabinet to withdraw 1mg of dilaudid. Respondent did not record the administration of this medication to the patient. Accordingly, 1mg of dilaudid in Respondent's possession went missing. There is no documentation that it was wasted.

iii. Patient GG: On May 11, 2007, the physician order called for 1 tab of vicodin at 0040 hours. At 0113 hours, Respondent used the Acudose-RX cabinet to withdraw 2 tabs of vicodin. The illegible medication administration record reflected an illegible quantity of vicodin tabs given to the patient at 0100, prior to the actual withdrawal of the medication from the Acusode-RX cabinet. Accordingly, the actual amount of administered or unaccounted for vicodin in Respondent's possession is unknown.

iv. Patient CJ: On May 22, 2007, without any physician order for the medication, Respondent used the Acudose-RX cabinet to withdraw 2 tabs of vicodin. Respondent did not record the administration of this medication to the patient. Accordingly, 2 tabs of vicodin in Respondent's possession went missing. There is no documentation that it was wasted.

v. Patient BE: On May 22, 2007, without any physician order for the medication, Respondent used the Acudose-RX cabinet to withdraw 1mg of dilaudid. Respondent did not record the administration of this medication to the patient. Accordingly, 1mg of dilaudid in Respondent's possession went missing. There is no documentation that it was wasted.

vi. Patient FH: On May 27, 2007, the physician order called for .5 mg dilaudid at 1530 hours. Respondent used the Acudose-RX cabinet to withdraw 1mg of dilaudid. Respondent recorded the administration of .5 mg dilaudid at 1920 hours, prior to the actual withdrawal of the medication from the Acusode-RX cabinet. Accordingly, at least .5mg of dilaudid in Respondent's possession went missing. There is no documentation that it was wasted.

password known only to that individual.

vii. Patient CM: On May 27, 2007, the physician order called for 1 mg dilaudid at 2005 hours. Respondent used the Acudose-RX cabinet to withdraw 2 mg of dilaudid. Respondent recorded the administration of 1 mg dilaudid at 2100 hours. Accordingly, 1mg of dilaudid in Respondent's possession went missing. There is no documentation that it was wasted.

viii. Patient CY: On May 27, 2007, the physician order called for 1 mg ativan at 1920 hours. Respondent used the Acudose-RX cabinet to withdraw 2 mg of ativan. Respondent recorded the administration of 1 mg ativan at 2000 hours. Accordingly, 1 mg of ativan in Respondent's possession went missing. There is no documentation that it was wasted.

ix. Patient TG: On May 27, 2007, the physician order called for 2 tab of vicodin at 2105 hours. The order was cancelled. At 2127 hours, Respondent used the Acudose-RX cabinet to withdraw 2 tabs of vicodin. Respondent recorded the administration of 2 tabs of vicodin at 2100 hours. Accordingly, the actual amount of administered or unaccounted for vicodin in Respondent's possession is unknown.

#### Possession of Controlled Substances:

b. Respondent possessed certain quantities of Atavan, Dilaudid, and Vicodin, as set forth in subparagraph (a) above, without a valid prescription from a physician, dentist, podiatrist, optometrist, veterinarian, or naturopathic doctor, in violation of Code section 4060.

#### Prescription of Controlled Substances:

c. Respondent prescribed the controlled substancea, Atavan, Dilaudid, and Vicodin, for herself, as set forth in subparagraph (a) above.

### Self-Furnishing of Controlled Substances:

d. Respondent furnished Atavan, Dilaudid, and Vicodin to herself without lawful authority therefor. Respondent was observed to be impaired while on duty toward the end of her employment at the facility. Respondent was not documenting in patient charts and her behavior changed in that she became inconsistent. Other nurses had to oversee Respondent's patient care.

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#### SECOND CAUSE FOR DISCIPLINE

# (Use of Controlled Substances to an Extent or in a Manner Dangerous or Injurious to Oneself and/or Others)

17. Respondent is subject to disciplinary action pursuant to Code section 2761, subdivision (a), on the grounds of unprofessional conduct, as defined by Code section 2762, subdivision (b), in that while licensed as a registered nurse, Respondent used controlled substances, including, Atavan, Dilaudid, and Vicodin, to an extent or in a manner dangerous or injurious to herself and/or others. Respondent was observed to be impaired while on duty toward the end of her employment at the facility. Respondent was not documenting in patient charts and her behavior changed in that she became inconsistent. Other nurses had to oversee Respondent's patients' care. Furthermore, patient safety is at risk when a nurse is in possession of controlled substances without a physician's order and when that nurse does not account for that medication. The facts supporting this cause for discipline are in paragraph 16 above and herein incorporated by reference.

### THIRD CAUSE FOR DISCIPLINE

### (Unprofessional Conduct - Incompetence and Gross Negligence)

18. Respondent is subject to disciplinary action pursuant to Code section 2761, subdivision (a)(1) for incompetence or gross negligence in carrying out usual certified or licensed nursing functions for withdrawing medication without a physician's order, or withdrawing twice the amount ordered and failing to account for the medication that was withdrawn. Such conduct placed her patients at great risk because a nurse is responsible for ensuring that medication is administered pursuant to a valid physician order. The facts supporting this cause for discipline are in paragraph 16 above and herein incorporated by reference.

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#### **PRAYER**

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Board of Registered Nursing issue a decision:

- 1. Revoking or suspending Registered Nurse License Number 547096, issued to Linda Lee Lewis;
- 2. Ordering Linda Lee Lewis to pay the Board of Registered Nursing the reasonable costs of the investigation and enforcement of this case, pursuant to Business and Professions Code section 125.3; and

Complainant

3. Taking such other and further action as deemed necessary and proper.

DATED:	5/17/10	Louise R. Baile
		LOUISE R. BAILEY, M.ED., BAY
		Interim Executive Officer
		Board of Registered Nursing
		Department of Consumer Affairs
		State of California

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